STATE OF SOUTH DAKOTA
Statement of Legal Newspaper Ownership and Circulation

Return to: Secretary of State, 500 E. Capitol, Pierre, SD 57501-5077

1. TITLE OF NEWSPAPER Edgemont Herald Tribune		2. DATE 09-21-07
3. FREQUENCY OF ISSUE weekly	3A. NO. OF ISSUES PUBLISHED ANNUALLY 51	3B. ANNUAL SUBSCRIPTION PRICE $
4. COMPLETE MAILING ADDRESS OF KNOWN OFFICE OF PUBLICATION (Street, City, County, State and ZIP+4 Code) (Not printers) PO Box 660 (410 Second Ave), Edgemont, Fall River County, SD 57735-0660		
5. COMPLETE MAILING ADDRESS OF THE HEADQUARTERS OR GENERAL BUSINESS OFFICES OF THE PUBLISHER (Not printers) PO Box 660 (410 Second Ave), Edgemont, Fall River County, SD 57735-0660		
6. FULL NAME OF PUBLISHER: Anne I. Cassens		

7. OWNER (If owned by a corporation, its name and address must be stated and list on the back of this form the names and addresses of stockholders owning or holding 1 percent or more of total amount of stock. If not owned by a corporation, the names and addresses of the individual owners must be given. If owned by a partnership or other unincorporated firm, its name and address, as well as that of each individual must be given.

FULL NAME	COMPLETE MAILING ADDRESS
Cassens Companies, Inc.	PO Box 660 (410 Second Ave), Edgemont, Fall River County, SD 57735-0660

8. KNOWN BONDHOLDERS, MORTGAGES, AND OTHER SECURITY HOLDERS OWNING OR HOLDING 1 PERCENT OR MORE OF TOTAL AMOUNT OF BONDS, MORTGAGES OR OTHER SECURITIES (If there are none, so state. If more space is needed, list on back of this form.

NONE

9. EXTENT AND NATURE OF CIRCULATION	AVERAGE NO. COPIES EACH ISSUED PRECEDING 12 MONTHS	ACTUAL NO. COPIES ISSUED NEAREST TO FILING DATE
A. TOTAL NO. COPIES (Net Press Run)	850	850
B. PAID AND/OR REQUESTED CIRCULATION 1. Sales through dealers and carriers, street vendors and counter sales.	230	230
2. Mail Subscription (Paid and or requested)	410	438
C. TOTAL PAID AND/OR REQUESTED CIRCULATION (Sum of 9B1 and 9B2)	640	668
D. FREE DISTRIBUTION 1. BY MAIL, CARRIER OR OTHER MEANS	0	0
2. SAMPLES, COMPLIMENTARY AND OTHER FREE COPIES	15	20
E. TOTAL DISTRIBUTION (Sum of C, D1 and D2)	655	688
F. COPIES NOT DISTRIBUTED 1. Office use, left over, unaccounted, spoiled after printing	120	92
2. Return from News Agents	75	70
G. TOTAL (Sum of E, F1 and F2 – Should equal net press run shown in A)	850	850

Statement must be signed by Publisher, Business Manager, or Owner in the presence of a Notary Public

I swear that the statements made by me are true, correct, and complete:

Anne Cassens
(Signature)

Publisher
(Title)

State of South Dakota)
§
County of)

CYNTHIA L TURNER
NOTARY PUBLIC
State of South Dakota
SEAL

Sworn to before me this 2ND day of OCTOBER, 2007

Cynthia L Turner
Notary Public

My commission expires: 2-28-2013

Form: SOS REC 051 7/2004